Appendix G
Audits

CHARS
UB-92 Audits

Audit Number	Audit Message	Clin/ Fin	FL#	MCE
1010	Patient control number is missing	C	3	
1015	Patient control number is a duplicate.	C	3	
1021	Invalid as an accommodation revenue code	F	42	
1022	Invalid as an ancillary revenue code.	F	42	
1025	Accommodation revenue code is missing	F	42	
1027	Ancillary revenue code is missing	F	42	
1030	Accommodation revenue code is not numeric	F	42	
1032	Ancillary revenue code is not numeric	F	42	
1039	Accommodation line item charge is missing	F	42	
1041	Ancillary line item charge is missing	F	47	
1044	Accommodation line item charge is not numeric	F	47	
1046	Ancillary line item charge is not numeric	F	47	
1059	Accommodation service units are missing	F	46	
1061	Ancillary service units are missing	F	46	
1064	Accommodation service units is not numeric	F	46	
1066	Ancillary service units are not numeric	F	46	
1080	Admission source is missing.	C	20	
1125	Admission type is missing.	C	19	
1180	Admit date is missing, age and LOS cannot be calculated.	C	17	
1185	Admit date is not a valid date, age and LOS cannot be calculated.	C	17	
1195	Age > 124		14, 17	15
1210	Admission source not valid.	C	20	
1215	Admission type is not valid.	C	19	
1235	Discharge date is missing, LOS cannot be calculated.	C	6, 32-35	
1240	Discharge date is not a valid date, LOS cannot be calculated.	C	6, 32-35	
1260	LOS > 365 days.	C		
1280	Principal diagnosis is missing.	C	67	1
1286	An E-code cannot be used as the principal diagnosis	C	67	2
1290	Principal diagnosis is not valid.	C	67	1
1291	Diagnosis is a duplicate of the principal diagnosis.	C	67	3
1292	Manifestation code was given for principal diagnosis.	C	67	6
1293	Principal payer is invalid or missing.	F	50	
1303	Operating physician is present but principal procedure is missing.	C	80	
1305	Principal procedure (ICD-9-CM) is not valid.	C	80	1
1320	Patient Status is missing.	C	22	17
1323	Patient Status is not numeric.	C	22	17
1340	Sex is missing.	C	15	16
1355	Total accommodation charge is not numeric.	F	47	
1356	Total ancillary charge is not numeric	F	47	
1380	Zip Code is missing.	C	13	
1390	Other diagnosis is not valid.	C	68-75, 77	1
1420	Birth date is missing, age cannot be calculated	C	14	
1425	Birth date is not a valid date, age cannot be calculated	C	14	
1503	Invalid Format for Medicare Provider Number.	C	3	
1505	Other procedure is not valid.	C	81A-E	1
1550	Discharge date before admit date.	C	6, 32-35, 17	
1555	Normal Delivery diagnosis is inconsistent with a Cesarean Section procedure.	C	67, 80	1, 4, 5
1570	Sex is inconsistent with principal diagnosis.	C	15, 67	16
1580	Sex is inconsistent with principal procedure.	C	15, 80	16
1596	Age > 0 with principal diagnosis appropriate for infants only.	C	14, 17, 67	4
1598	Age > 0 and other diagnosis appropriate for infants only.	C	14, 17, 68-75	4

Audit Number	Audit Message	Clin/Fin	FL#	MCE
1601	Age > 17 and principal diagnosis appropriate for children only.	C	14, 17, 67	4
1603	Age > 17 and other diagnosis appropriate for children only.	C	14, 17, 68-75	4
1606	Age < 15 and principal diagnosis appropriate for adults only.	C	14, 17, 67	4
1608	Age < 15 and other diagnosis appropriate for adults only.	C	14, 17, 68-75	4
1610	Sex is inconsistent with other diagnosis.	C	15, 68-75	16
1620	Birth date is after admit date.	C	14, 17	
1625	Sex is inconsistent with other procedure.	C	15, 81A-E	16
1635	Attending physician code is missing.	C	82	
1640	Admit type is newborn and birthdate is more than 2 days before admit date.	C	17, 19	
1655	Age is not 12 to 55 and principal diagnosis is appropriate for women of childbearing years only.	C	14, 17, 67	4
1665	Age is not 12 to 55 and other diagnosis is appropriate for women of childbearing years only.	C	14, 17, 68-75	4
1670	Age is not 12 to 55 and principal procedure is appropriate for women of childbearing years only.	C	14, 17, 80	4
1675	Age is not 12 to 55 and other procedure is appropriate for women of childbearing years only.	C	14, 17, 81A-E	4
1677	The total charge revenue code is missing	F	47	
1678	More than one total charges revenue code was provided	F	47	
1687	Individual line item charges do not add up to total charges.	F	47	
8022	Invalid revenue code for CHARS.	F	42	
8282	Diagnosis indicates trauma or poisoning but no E-Code is present.	C	67-76, 77	
8325	Patient status is not valid for CHARS	C	22	17
8802	No accommodations revenue codes	F	42	
8804	Physician ID is not Valid	C	82, 83	
8806	Zip code is invalid.	C	13	
8810	LOS - LOA Less Than 1 Day	C	6, 17, 32-35, 42	
8812	Payer number is not valid	F		
8814	Principal Procedure but no operating physician	C	80, 83	
8820	Charges per Day < $300	F	6, 47	
8822	Charges per Day > $25,000	F	6, 47	
8824	Unable to Assign Diagnosis Related Group (DRG)	C	22, 67	1,2,4,5,6, 9,15,16, 17
8826	Patient Last Name (first 2 characters) is missing or invalid	C	12	
8828	Patient First Name (first 2 characters) is missing or invalid	C	12	
8830	Patient Control Number is missing	C	3	
8860	Sex is not valid, only M or F allowed	C	15	5, 16
8870	Admit type is newborn, but admission source is not newborn	C	19, 20	
8880	Accommodation or ancillary line item charges are negative.	C	47	
8895	Accommodation revenue code is missing	F	42	
8896	Accommodation line item charge is missing	F	47	